

IOWA COUNCIL FOR EARLY ACCESS

Annual Meeting September 16, 2005 9:00 a.m. – 2:00 p.m.

Des Moines Botanical Center Levitt Room 909 E River Dr Des Moines, IA 50316 (515) 323-8900

Members attending

Cathy Ryba
Robert Bacon
Kyla Alba
Scott Beall
Glenn Baughman
Angela Burke Boston
Mary Jane Brotherson
Nick Burnett
Michael Fay
Carrie Fitzgerald for Jane Borst
Hector Garrido Osorio
Glenn Grove

Royann Mraz
Carolyn Nelson
Pamela Parker
Maureen Schletzbaum
Debra Sixta
Carrie Sodders
Greg Titus
Lana Michelson
Jim Overland

Jeff Lobas

Jan Mackey Troy McCarthy

Barbara Merrill

Members Excused

Kelly Hancock

Jane Borst Mark Smith

Staff

Julie Curry Kay Leeper Barb Khal Barbara Ohlund Dan Stevens

Handouts:

Minutes of May 20, 2005 Examining Iowa Part C Enduring Concepts, Iowa and National Indicators Part C State Performance Plan and Annual Performance Report

ICEA06/Minutes 9-05.doc Approved 11/18/05 Iowa's Six Year State Performance Plan (Power Point)
Iowa's Early Care, Health and Education Strategic Plan
Impact of not applying for and receiving IDEA Part C Grant
Introduction to Iowa's Birth Mandate for Special Education Services

Call to Order

The meeting was called to order at 9 a.m. by Bob Bacon, Chair. The Minutes were approved as written. New members were welcomed.

Executive Committee Update

Bob Bacon discussed the current status of the key issues under discussion and actions of the Executive Committee since the May 2005 Council meeting. Over the summer the Executive Committee has been considering the following issues sent from the Council and the Lead Agency:

- 1. Gathered information about the Six Year State Performance Plan and how that plan is impacting the work of the Council and the Early ACCESS system. Key issues have been compiled for discussion by the full Council today and at the November meeting.
- 2. Discussed the impact of possible non participation in Part C. This is a complex issue but the Executive Committee has organized the content for Council discussion. More study is needed.
- **3.** Crafted a response to Iowa's Early Care, Health, and Education System Strategic Plan request for endorsement. Concerns were raised that this document is not inclusive of children with special needs. This will be considered in the day's agenda.
- **4.** Followed up on the work from the Council regarding the difficulty of sharing of information related to communicating back to providers. **Outcome**: Advised the Lead Agency to adopt a process using Directory Information to facilitate sharing the name only of children referred for Early ACCESS services. This allows EA to respond to providers that the referral from a specific child was received and that assessment of eligibility for services will be done. Further in depth information will require a release of information. This allows the Service Coordinator time to get permission to share information.
- 5. Continued to follow the progress of the ABCD II project –Assuring Better Child Health and Development II. This project is working with providers to improve developmental screening and referrals. As part of that project there is now a web page for providers to assist them as they work with families. Early ACCESS has a link on the web page and is an integral part of the guidelines for screening and referral. It can be accessed at www.iowaepsdt.org.
- 6. Continued to coordinate with the work of the MR/MH/DD/BI commission and other DHS projects that affect Early ACCESS services and families.

Election of officers. Jan Mackey

The report of the Nominating Committee was presented to the council. Members of the committee are Jan Mackey - chair, Deborah Sixta M.D. and Maureen Schletzbaum.

There being no other nominees from the floor, the following slate of officers brought forward by the Nominating Committee was unanimously elected to serve the ICEA in 2006:

- Cathy Ryba Chair
- Troy McCarthy Vice Chair
- Bob Bacon
- Barbara Merrill

The Gavel passed from Bob Bacon to Cathy Ryba.

On behalf of the ICEA, Kay Leeper recognized Bob Bacon for his years of service as Executive Committee Chair and Vice Chair and thanked him for his willingness to continue to serve in the coming year.

<u>Introduction of the Six Year Plan and Annual Performance Report</u> <u>Barbara Ohlund & Barb</u> Khul

Barbara Ohlund presented the requirements for the Iowa Six Year State Performance Plan (refer to handout: *Iowa's Six Year State Performance Plan*). The Department must address four priority areas and thirty-four indicators. The document must be submitted to OSEP December 2, 2005. The plan is to seek public comment in November and begin to report progress in February. The process for writing the plan calls for broad stakeholder input. The Council is a key part of that input.

Barb Khal explained the general overview of the framework for the plan. Iowa recognizes the "Enduring Concepts" developed over the last two years as the fundamental concepts and standards for the system. The concepts were developed by a large stakeholder group with ultimate endorsement by the Council a year ago. State Performance measures will be reviewed in terms of their relationship to the Enduring concepts to make sure that the key points we value will be included in our performance measures. Refer to handout: *Examining Iowa Part C Enduring Concepts, Iowa and National Indicators*.

At this point there is no baseline data for new indicators. The first year of measurement will provide the baseline. However, as established at the May Council meeting, current data identifies transition is an area that needs special attention.

Advise the Lead Agency regarding the content of the six year plan

The Council divided into workgroups for discussion of the content of the State Performance Plan. Input into the plan included recommendations for measurable targets, strategies and data collection. (Refer to Attachment A for detail).

Report of the study regarding the impact of possible non participation in Part C

Tabled

Endorsement of the Early Childhood Strategic Plan

Troy McCarthy discussed the Executive Committee recommendation regarding the Early Childhood Strategic Plan. Based on the comments of the Council, the Executive Committee recommended changes to the Early Care, Health and Education Committee (ECHE) advocating for language in the Strategic Plan that recognized the special needs population. The ECHE committee responded that change at this juncture is not possible since several organizations have endorsed the document as written, but suggested that comments would be considered in the next revision.

The Council recommended endorsing the Early Childhood Strategic Plan with conditions as noted in the handout (*Iowa's Early Care, Health and Education Strategic Plan*).

Chair Cathy Ryba asked members to carefully consider the committees they would be willing to serve on in the next year. She will use member preferences to appoint committees in October.

Sharing

Members shared opportunities, new resources, best practices and experiences with the children, families and the system for Early ACCESS.

Adjournment

The meeting was adjourned at 2 p.m. by Cathy Ryba.

Next meeting will be November 18, 2005 in the Oak Room of the Des Moines Botanical Center

Attachment A

Recommendations to the Lead Agency from the ICEA regarding the content of the Six Year State Performance Plan (Notes)

CHILD FIND

Target: Birth to 1 = increase rates .2% over the 6 years Target: Birth to 3 = increase rates .4% over the 6 years

TREND should be flat initially with the growth occurring the last one to two years.

Justification for this is that the birth rate in Iowa is decreasing, the percent found is increasing, and the funding is decreasing.

STRATEGIES

- Increase state appropriations to AEA for Medicaid match to provide or contract Early ACCESS Services
- Investigate alternative resources
- Education for primary care practitioner community about Early ACCESS (and Foster Care providers) – include residency programs and other pre-service education opportunities
- Increasing operational efficiency of Early ACCESS identification

NATURAL ENVIRONMENT

TARGET: 96.6% in 6 years

STRATEGIES:

- Improve quality of services
- Identify definition of homeless
- S-A to determine effectiveness of Service Coordinators (Test, Survey, Screening, Competencies)
- Language TDD
- Provision of summer services continuing in natural environment
- Maintain quantity and quality; address both
- Interpreters available for language and cultural issues; bilingual service coordinators
- Service coordinators need to understand cultures and community they serve; expand pilot program of immigration
- Service Coordinators understand appropriate services for child; what's available/choices
- Family support provided for parents; specialized support groups (parents need to receive services so they can attend family support meetings)

- Grantees need standard information to share with Service Coordinators so families are informed of variety of services available
- Networking system for families to talk to other families
- Service Coordinators understand/match needs of child (i.e., medical needs, medical background) educate self
- Develop quality of service based on Service Coordinator competencies
- Getting/ensuring that families get training needed to ensure child can stay in home; quality assurance measures
- Feedback to the referral source
- More family coordination of information and use technology to meet; keep updated; more teaming of professionals outside of the AEA
- Family has access to the professional providing services not to rely on Service Coordinator
- Train families to be advocates
- Clear, concise, understandable information for parents; parental rights brochure in language that is easily understood; review parental rights with parents.

OTHER

Identify our standard for each service being provided for birth to 3 years; state of the art services delivered in any part of state—FAMILY SERVICES:

- Assistive technology
- Audiology
- Family training, counseling, home visits
- Medical
- Transportation
- Vision
- Nursing
- Nutrition
- Occupational Therapy
- Physical therapy
- Psychological therapy
- Respite care
- Social work
- Special instruction
- Speech-language

Provision of services to homeless remains a question. How many are there?

TRANSITION C TO B

STRATEGIES

- Use the agency data system (Information Management System?) to alert Service Coordinators, Parents, and LEAs six months prior to the 90 day target date—mail the transition brochure out with the reminder to the parents.
- Develop a strategy to track children moving away from services (state) have families inform/notify if moving have a box on folder that says let us know if you're moving
- Enforce procedures and documentation of procedures completed (Service Coordinator)
- Parent advocate (awareness of Service Coordinator responsibilities/deadlines)
- Awareness of LEA contact to be responsible to attend transition meetings; summer availability of staff
- Training service coordinators checklist look at AEA 13 and Des Moines procedures of transition
- Gather data on Service Coordination to analyze where the breakdowns occur tie this to Service Coordinator job reviews
- Develop an integrated system of Service Coordinator review (documentation, meeting, notification)
- Web IFSP uniform IFSP across state.

OTHER

Seamless system of service B-21 ONE case manager for life

SERVICES

STRATEGIES

- Autistic Spectrum Disorder services for 0-3 community; structured programs (20-25 hours per week for ages 2-3); speech-language services
- Expand SLP services to 0-3
- More nursing services
- All services are available at frequency needed
- Explore contracting Medicaid
- Provide transportation so there is access
- Insurance issues are resolved HAWKI, Medicaid, Private
- Collect timeline data to inform about "timeliness" new data collection
- Inventory of availability: IFSP assist capacity; Establish CARE standards based on expected services; Nutrition; Strengthen partnerships with Title V for child health (ISU extension, head start, empowerment)
- Inventory of service that are untapped Head Start ISU extension provide training and services
- Summer service are provided across the state seamless; before and after normal working hours (monitor)
- IFSP training on services: pre and inservice
- NOTE funding resources; partnering agency services
- Service Coordinators have a back system when services are not provided or available
- State money for providing 0-3 services legislative agenda
- Legislative insurance agenda very targeted
- Availability of interpreters
- Timely 2 weeks.

TIMELY EVALUATION AND ASSESSMENT

STRATEGIES

- Tie data analysis with standards for quality
- Establish criteria for appropriate reasons for exclusions for 45-day (include this as part of standards)
- Public awareness of the referral process and the role of the referral source in evaluation and service coordination especially with PITC and home child care nurse consultants and centers
- Develop better documentation standard forms, easy check-off
- Develop appropriate standards for evaluating each required area e.g., hearing may require different requirements
- Develop Processes to make obtaining the release(s) quicker (for health info) include deadlines
- Refine referral procedures for referral sources include deadlines
- Work with medical practices to upgrade skills and what to send to do medical home (vision, hearing, health)
- Develop a referral form for medical practices Region 1 and Dubuque ABCD II site; i.e., single sheet/faxable
- Assist ABCD II in spreading to all Medicaid and non-Medicaid children
- Training and referral sources re referral and eligibility
- Analyze data to identify areas with higher need and provide technical and identify high performance areas to share plan strategically and staged implementation.
- Notify referral sources of time lines